PTO/SB/17 (12-04)

Under the Reperwork Reduction	Approved for use through 07/31/2006. OMB 0551-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE should be a collection of information unless it displays a valid OMB control number.							
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
FEE TRANSMITTAL For FY 2005				Application Num	ber 09/	09/596,444		
			ᄔᆝᆚ	Filing Date	Jur	June 19, 2000		
				First Named Inve	entor We	Wei Huang		
				Examiner Name	An	n Y. Lam	<u></u>	
Applicant claims small entity status. See 37 CFR 1.27				Art Unit	164	41		
TOTAL AMOUNT OF PAYM	иENT (\$)	395		Attorney Docket	No. LJI	_ 354B		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 11-1540 Deposit Account Name: Kolisch Hartwell, P.C.								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s)								
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
information and authorization on PTO-2038.								
FEE CALCULATION								
1. BASIC FILING, SEAR	CH, AND E FILING F			CH FEES	EVAMIN	ATION FEES		
	<u>s</u>	mall Entity		Small Entity		Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	<u>Fee (\$)</u>	Fee (\$)	Fees Paid (\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0 .	0	0		
2. EXCESS CLAIM FEES Small Entity Fee (%)								
Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25								
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100								
Multiple dependent claims							360 180	
	Extra Claims	<u>Fee (\$)</u>	Fee F	Paid (\$)	<u>Multiple [</u>	Dependent Claims	_	
16 46 or HP =	0	X=	·		<u>Fee (\$)</u>	Fee Pai	id (\$)	
HP = highest number of total cl Indep. Claims	aaims paid for, E xtra Claims		Fee F	Paid (\$)				
19 or HP =	0	_x=	•					
HP = highest number of independent claims paid for, if greater than 3								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)								
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
100 = / 50 = (round up to a whole number) x =								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)								
Other: RCE 395								
SUBMITTED BY /		α	Ta	Registration No.		T÷		
Signature	as K/	1 Uman	17	Registration No. 4	12,253	Telephone	(503) 224-6655	

Name (Print/Type) James R. Abney Date July 20, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.